

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): Adli, Wahid

Appl. No.: 09/937,877

Conf. No.: 8954

Filed: January 7, 2002

Title: METHOD OF TRANSMITTING DATA TO MEMBERS OF AN OPERATOR  
SERVICE

Art Unit: 2542

Examiner: Bui, Bing Q.

Docket No.: 112740-343

**RECEIVED**

AUG 10 2004

Technology Center 2600

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

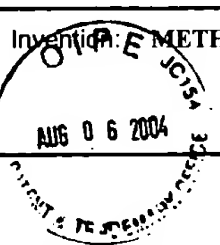
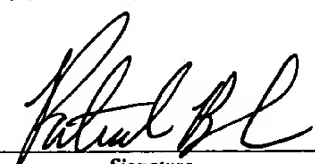
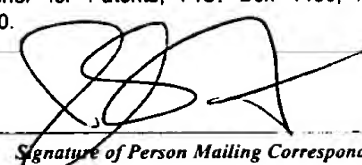
In response to the Ex-parte Quayle action of June 3, 2004, please amend the above-identified patent application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 3 of this paper.

**Remarks** begin on page 6 of this paper.

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. 112740-343	
Applicant(s): Adli, Wahid					
Application No. 09/937,877	Filing Date 1/7/2002	Examiner Bui, Bing Q.	Customer No. 29177	Group Art Unit 2542	Confirmation No. 8954
Inventor: METHOD OF TRANSMITTING DATA TO MEMBERS OF AN OPERATOR SERVICE					
			<b>RECEIVED</b>		
COMMISSIONER FOR PATENTS:			AUG 10 2004		
Transmitted herewith is an amendment in the above-identified application.				Technology Center 2600	
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	7 -	7 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	7 -	7 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div style="margin-top: 20px;"><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-1818 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div> <div style="margin-top: 20px;"> _____ Signature</div> <div style="margin-top: 20px;">Dated: August 3, 2004</div> <div style="margin-top: 20px;">Patrick B. Law Reg. No. 41,549 Bell, Boyd &amp; Lloyd LLC P.O. Box 1135 Chicago, Illinois 60690-1135 Telephone: (312) 781-6801</div>					
<div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 400px;"><p>I certify that this document and fee is being deposited on August 3, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><div style="text-align: center;"> _____ Signature of Person Mailing Correspondence</div><div style="text-align: center;">Renee Street _____ Typed or Printed Name of Person Mailing Correspondence</div></div>					
CC:					